•	Change in Company's premium or rate	e level produced by rate revision effective	June 1, 2005
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
2		0	+0.3%
3. 4.	Liability Other Than Auto Burglary and Theft	U	+0.376
5.	Glass		
5. 6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine	·	
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	
na			
Brief	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
Dele	ting Company Exception to Rule 24.E	2.2.M and adopting ISO's State Rule 24.3.2.	m

- \* Adjusted to reflect all prior rate changes.
  \*\* Change in Company's premium level which will result from application of new rates.

BIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR	All America Insurance Company
APR 0 4 2005	Name of Company
SPRINGFIELD, ILLINOI	(Mrs.) Petrise Meyer SR Rates & Forms Analyst
	Official - Title

بقينها فسترياه

	(1)	(2)	(3)
	(2)	Annual Premium	Percent
	•		
	<u>Coverage</u>	Volume (Illinois) *	Change (+ or - )**
. A	utomobile Liability		
	Private Passenger		
	Commercial	***************************************	
. A	utomobile Physical Damage		
	Private Passenger		
	Commercial	<del></del>	
. L	iability Other Than Auto	3,491	-9.9
	urglary and Theft		
	lass		
	idelity	<del></del>	
	urety		<del></del>
	oiler and Machinery	<del></del>	
-	ire		
	xtended Coverage		
	nland Marine		
	omeowners		
	ommercial Multi-Peril		
	rop Hail		
	therLine of Insurance		
. O	ther	territory (territor	ies) or certain
. O	Line of Insurance  liling only apply to certain servers.  description of filing. (If	No filing follows rate:	s of an advisory
eief	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization	No filing follows rate:	s of an advisory
es fasse	Line of Insurance  liling only apply to certain servers.  description of filing. (If	No filing follows rate:	s of an advisory
eief	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization	No filing follows rate:	s of an advisory
pes flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization	No filing follows rate:	s of an advisory
oes f lasse rief rgani Add	Line of Insurance  Line of Insurance  Siling only apply to certain es?: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs	No filing follows rate:	s of an advisory
pes flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs	filing follows rate:	s of an advisory
oes flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs	filing follows rate:	s of an advisory
pes flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs	filing follows rate:	s of an advisory
ces flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs	filing follows rate:	s of an advisory
ces flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs  usted to reflect all prior range in Company's aremium levels of the company's aremium levels of th	filing follows rate:	s of an advisory
ces flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs  usted to reflect all prior range in Company's aremium levels of the company's aremium levels of th	filing follows rate:	s of an advisory
oes flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs	filing follows rate:	s of an advisory
pes flasserief rgani Add	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs  usted to reflect all prior range in Company's aremium level in Company's aremium	filing follows rate:	s of an advisory
cief cgani Add	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs  usted to reflect all prior range in Company's aremium level in Company's aremium	filing follows rate:	s of an advisory
Des flasse	Line of Insurance  liling only apply to certain ser: If so, specify:  description of filing. (If zation, specify organization opt ISO's revised loss costs  usted to reflect all prior range in Company's aremium levels of the company's aremium levels of th	filing follows rate:	s of an advisory

Change in Company's premium or rate level produced by rate revision effective  $\frac{NB}{100}$ :  $\frac{NB}{100}$ :

(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine	\$ 1,247,238	-(),5%
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance		
Does filing only apply to certain specify: No	territory (territories)	or certain classes? If so,
Brief description of filing. (If specify organization): Rate and Ru	filing following rates la Revision, changes list	of an advisory organization, ed on coverletter.
Adjusted to reflect all prior rate	e changes.	application of new rates.

"Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

30004 (6-77)

APR 1:9 2005 SPRINGFIELD. ILLINOIS Name of Company

Emily Schmit, Administrator <u>Commercial Prop. & Liab. Actuarial</u> Official - Title

•	Change in Company's premiun	n or rate level produced by rate revision effective	June 1, 2005
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damag Private Passenger Commercial		
3.	Liability Other Than Auto	\$335,363	+0.3%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity	<del></del>	
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	Mg. 1	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		****
na Brief c	lescription of filing. (If filing	follows rates of an advisory organization, specify	organization):
Delet	ing Company Exception to Ru	le 24.E.2.M and adopting ISO's State Rule 24.3.2	.m
		יום	VISION OF INSURANCE
			RECEIVED
* Ac	ljusted to reflect all prior rate of		TECEIVED
	nange in Company's premium l		APR 0 4 2005
	sult from application of new ra	ites.	0 1 2000
	2:40	ON OF INSUFIGNOE	
	DIVISI	ON OF HOUSEPE	PRINGFIELD, ILLINOIS
		4. 6 · P. P. ·	
		?305 <u>Centr</u>	al Mutual Insurance Company
DIVIS	SION OF INSURANCE		Name of Company
	ATE OF ILLINOIS/IDFPR	1	
		RINGFIELD ILLINOIS	
	- 2005 SP		.) Petrise Meyer
		· ·	•
	l	SKR	Rates & Forms Analyst
H2921	NAGFIELD, ILLINOIS		Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/1/2005

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
<ol> <li>Automobile Physical Damage Private Passenger Commerc</li> </ol>	al	
3. Liability Other Than Auto	67,102	-10.10%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territo	ry (territories) or certain classes? If so, specify:	
boes ming only apply to certain terms	if (territories) of certain diasses: If so, specify.	
D.:- (		
, , , ,	ws rates of an advisory organization, specify o	
adoption of ISO filing designation GL-2005-BGL1		
*Adjusted to reflect all prior rate chan-	100	
	el which will result from application of new rates	<b>5</b> .
	Crum & Forster Indemnity Co	mpany
		lame of Company
	Ruth A. Overholser, Regulato	ry Compliance Analyst
		Official - Title



# **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate leve	el produced by rate revision effective _	06/01/05 New and Renewal Business
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial         Liability Other Than Auto         Burglary and Theft         Glass</li> </ol>	\$1,452,917	+0.2%
6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire		
10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail		
15. OtherLine of Insurance  Does filing only apply to certain territory (ter	rritories) or certain classes? If so, speci	ify: No
Brief description of filing. (If filing follows rat	saat Calabilla Bassana	organization): Filing of various
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	ch will result from application of new rat	tes.
	Empire Fire	and Marine Insurance Company Name of Company
	Diane M.	Zaborowski - Product Analyst Official - Title



	Change in Company's premium or rate	e level produced by rate revision effective	11/01/05
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners	24,117	-9.9%
13. 14. 15.	Commercial Multi-Peril Crop Hail Other Line of Insurance		
No Brief	description of filing. (If filing follows	rates of an advisory organization, specify o	gamization of Insurance
* A	djusted to reflect all prior rate changes hange in Company's premium level we sult from application of new rates.	s. hich will	APR 2 5 2005  SPRINGFIELD, ILLINOIS  National Insurance Company Name of Company

Debbie Smith-Compliance Spec. Official - Title

# § 754. Exhibit A Summary sheet (Form RF-3)

### SUMMARY SHEET

(1)	(2) Annual Premium	vision effective <u>8/15/2</u> (3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private		•
Passenger **		
Commercial		
2. Automobile Physical Damage	,	
Private Passenger		<del></del>
Commercial	72,663.00	-13.2%
3. Liability Other Than Auto	12,003.00	
1. Burglary and Theft 5. Glass		
i. Fidelity		
. Surety		
R. Boiler and Machinery		
. Fire		······································
Extended Coverage		<del></del>
. Inland Marine . Homeowners	-	
. Commercial Multi-Peril		
. Çrop Hail		
. Other	<del></del> ~	<del></del>
Life of Insurance		
	•	
oes filing only apply to certain territory	v (territories) or certain (	classes? If so, specify:
<u>-</u>		
rief description of filing (If filing follo	ws rates of an advisory	organization, specify line rates and AND
ganization): independent library invision six genr liab. contra	actors mod factor	, , , , , , , , , , , , , , , , , , , ,

\*Adjusted to reflect all prior rate changes.

Iowa American InsuranceCompany

DIVISION OF THIS URANGERY STATE OF ILLINOIS/IDEPR

APR 18 2005

SPRINGFIELD, ILLINOIS

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

# § 754. Exhibit A Summary sheet (Form RF-3)

Change in Company's premium or rate l	MARY SHEET Toyol produced by rate re	vision effective	5
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**	,
<ol> <li>Automobile Liability Private         Passenger         Commercial</li> <li>Automobile Physical Damage         Private Passenger         Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> </ol>	869,779.	-13.2%	
<ol> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> <li>Other Life of Insurance</li> </ol>			-54 -147 -147 -147 -147
Does filing only apply to certain territor	y (territories) or certain	classes? If so, specify:	ų
Brief description of filing. (If filing follo organization): independent filing genr. liab. contractors modern and service and	es.  which will result from appropriate the substitution of the substitution of the substitution appropriate the substitution of the substitution	ine rates and chark	ge division SIX
	. Name of	Company	-

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPA RECEIVED APR 1 8 2005

SPRINGFIELD, ILLINOIS

### **SUMMARY SHEET**

	Change in Company's premium or ra	te level produced by rate revision effective	6.6%
	(1)	(2)	(3)
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	***	
2.	Automobile Physical Damage		
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto	\$ 80,363	6.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Daga	Elina anh, annh, ta aantain tamitam, (s		
Does	iming only apply to certain territory (t	erritories) or certain classes? If so, specify:	
Deiof.	description of filing (If filing follow	s rates of an advisory organization, specify o	
			organization);
Rev	ised Sports Liability Program rate	s and minimum premiums.	
		The Tables and the Control of the Co	
		10.2	
		• • • • • • • • • • • • • • • • • • • •	

\* Adjusted to reflect all prior rate changes.

Change in Company's premium level which will result from application of new rates.

SPRINGFIELD, ILLINOIS

Markel Insurance Company Name of Company

Deidre I Balbuena,

VP Product & Regulatory Services
Official - Title

Deide Ballmenn

# SUMMARY SHEET

C	hange in Company's premium or rat	e level produced by rate revision effective	11/01/2005
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial	\$77,923	-5.1%
3.	Liability Other Than Auto	\$77,923	3.170
4. 5.	Burglary and Theft Glass		
5. 6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Line of Insurance		
oes f N/A	iling only apply to certain territory (	territories) or certain classes? If so, specify:	:
rief ( Adoj	description of filing. (If filing follow tion of Illinois General Liability Lo	vs rates of an advisory organization, specify ss Costs as referenced in ISO Reference Do	organization): cument GL-2005-BGL1.

- \* Adjusted to reflect all prior rate changes.\* Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR RECEIVED

APR 2 0 2005

SPRINGFIELD, ILLINOIS

National Interstate Insurance Co. Name of Company

Kathy Koenig, Regulatory Compliance Specialist Official - Title

H29219D

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/1/2005 (1) (2) (3) **Annual Premium** Percent Volume (Illinois)\* Change (+ or -)\*\* Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage 2. Private Passenger Commercial 3. Liability Other Than Auto 3,906,279 -10.10% **Burglary and Theft** 4. 5. Glass **Fidelity** 6. 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): adoption of ISO filing designation GL-2005-BGL1 \*Adjusted to reflect all prior rate changes. \*\*Change in Company's premium level which will result from application of new rates.

The North River Insurance Company Name of Company

Ruth A. Overholser, Regulatory Compliance Analyst

Official - Title



APR 1 8 2005

SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective NB: 04/11/05 Ren:05/17/05.

(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage		
Private Passenger Commercial Liability Other Than Auto Liability and Theft	\$ 164,049	-1.9%
5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery		
9. Fire 10. Extended Coverage 11. Inland Marine		
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other		
Line of Insurance  Does filing only apply to certal specify: No	in territory (territories)	or certain classes? If so,
Brief description of filing. (specify organization): Rate and	If filing following rates	of an advisory organization,
Adjusted to reflect all prior r Change in Company's premium lev	ate changes. vel which will result from	application of new rates.

30004 (6-77)



Owners Insurance Company
Name of Company

Rmily Schmit, Administrator Commercial Prop. & Liab, Actuarial Official - Title

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective		7/01/05	
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger Commercial	<del></del>	
2.	Automobile Physical Damage		
۷.,	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	4,730,844	-4.3%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does N/A		erritories) or certain classes? If so, specify:	
Brief Rev	description of filing. (If filing follows ised our loss cost multipliers.	s rates of an advisory organization, specify o	organization):

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIMIDEPR RECEIVED

APR 1 1 2005

SPRINGFIELD, ILLINOIS

Selective Insurance Company of South Carolina

Name of Company

Judy Symons - State Filings Senior Analyst

Official - Title

H29219D

### **SUMMARY SHEET**

	(1)	(2)	(3)
	Cavaraga		
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
,		1.070.060	4.0%
	Liability Other Than Auto	1,078,060	4.0%
	Burglary and Theft Glass		
	Fidelity		
	Surety		-
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril	<u> </u>	
	Crop Hail		-
	Other	· · · · ·	
	Line of Insurance		
Does filii	no only apply to certain territory (t	erritories) or certain classes? If so, specify:	
N/A	-B)Fb-2 (-		

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.



Selective Insurance Company of the Southeast

Name of Company

Judy Symons - State Filings Senior Analyst

Official - Title

H29219D

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/1/2005

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>			
	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine	1,764,787	-10,10%			
12. 13. 14. 15.	Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	territories) or certain classes? If so, specify:				
	of description of filing. (If filing follows of ISO filing designation GL-2005-BGL1	rates of an advisory organization, specify or	ganization):			
*Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result from application of new rates.						
		United States Fire Insurance Company				
		N	ame of Company			
		Ruth A. Overholser, Regulator	y Compliance Analyst			



Official - Title